



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

## (CFA-4) Summary Sheet

FILE NUMBER

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? ☐ Yes ☒ No

### COMMITTEE INFORMATION

|  |                                      |
|--|--------------------------------------|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name                           |                                      |
| 2. Acronym or Abbreviated Name (if any)  | 3. Committee Telephone Number<br>( ) |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address |                                      |
| 5. City, State, ZIP Code   | 6. Party Affiliation (if applicable) |

### CANDIDATE INFORMATION (For Candidate's Committees Only)

|   |  |
|---|--|
| 7. Full Name of Candidate (include any nickname)<br><b>Michael Wherry</b>                           | 8. Party Affiliation or If Independent Candidate |
| 9. Office Sought (Include district number, if any. <b>Not required for exploratory committee.</b> ) | 10. County of Residence                          |

### TYPE OF REPORT

### CONVENTION CANDIDATES ONLY

|   |   |
|---|---|
| 11. Check one:<br><input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____<br><input checked="" type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) | Check one:<br><input type="checkbox"/> Pre-Convention<br><input type="checkbox"/> Post-Convention |
|---|---|

|   |                         |                          |
|---|-------------------------|--------------------------|
| 12. Reporting Period:<br>From: _____ Through: <b>12/18/2015</b>             | COLUMN A<br>This Period | COLUMN B<br>Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | <b>0.00</b>             |                          |
| 14. Cash on hand and investments January 1, current year.                   |                         | <b>0.00</b>              |

### CONTRIBUTIONS AND RECEIPTS

|   |              |              |
|---|--------------|--------------|
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) |              |              |
| 15a. Itemized (use Schedule A)  | <b>0.00</b>  |              |
| 15b. Unitemized   | <b>53.50</b> | <b>53.50</b> |
| 15c. Add lines 15a and 15b in both columns <b>SUBTOTAL</b>                                    | <b>53.5</b>  | <b>53.5</b>  |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B <b>TOTAL</b>            | <b>53.5</b>  | <b>53.5</b>  |

### EXPENDITURES

|  |              |              |
|--|--------------|--------------|
| (Note: These amounts include in-kind expenditures and loan repayments.)  |              |              |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C)   |              |              |
| 17b. Unitemized  | <b>53.50</b> | <b>53.50</b> |
| 17c. Add lines 17a and 17b in both columns <b>SUBTOTAL</b>   | <b>53.5</b>  | <b>53.5</b>  |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) <b>TOTAL</b> | <b>0</b>     | <b>0</b>     |
| 19. Debts OWED BY the committee (use Schedule D)   | <b>0.00</b>  |              |
| 20. Debts OWED TO the committee (use Schedule E)   | <b>0.00</b>  |              |

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

|   |       |                           |
|---|-------|---------------------------|
| Signature of Treasurer<br><i>Michael Wherry</i> | Title | Date<br><b>12/18/2015</b> |
| Signature of Candidate (if applicable)          |       | Date                      |

**WARNING:** Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

*Mylena A. Eldridge*

DEC 18 2015

**FILED**